

**STATE OF MONTANA**  
**OFFICE OF THE STATE PUBLIC DEFENDER**  
**CONTRACTED ATTORNEY SUMMARY CLAIM FORM**

Vendor ID #

**Please attach daily log for all work and/or costs on each case listed below.**

[illegible]

Attorney's Signature/Date of Submission

Contract Manager's Approval/Date Approved

**SIGNATURES ABOVE CERTIFY THAT ALL COSTS IN EXCESS OF \$200 HAVE BEEN PREAUTHORIZED.**  
**CONFLICT CASES: FAX TO KERRY NEWCOMER @ 406-327-0771 OR EMAIL TO K.NEWCOMER@GN-LAW.COM**  
**ALL OTHER NON CONFLICT CASES NEED TO BE SUBMITTED DIRECTLY TO THE RDPD FOR APPROVAL.**